

SENIOR PERIODONTAL CASE WORK-UP: DIAGNOSIS & TREATMENT PLANNING COMPETENCY

The Senior Periodontal Case Competency is a test of your overall clinical diagnostic and treatment skills in periodontics. This competency will examine your ability to perform an accurate and thorough periodontal examination; determine a periodontal diagnosis and an overall and tooth-by-tooth periodontal prognosis; formulate a periodontal problem list and a treatment plan to address each problem; educate and motivate your patient in appropriate techniques to control etiologic factors; perform appropriate non-surgical and surgical periodontal therapy; re-evaluate your patient's periodontal status at appropriate intervals and determine whether the patient's periodontal problems have been successfully resolved; and design and implement an appropriate periodontal recall program for the patient. Prior to initiating treatment on the patient selected for this competency, students must have passed the Year 3 – Periodontal Diagnosis and Treatment Planning Examination, and the Year 3 – Periodontal Re-evaluation Examination, and completed a minimum of 8 quadrants of root planing.

Case Assignment: Assignment of the Senior Periodontal Competency Case occurs in the Junior year following completion of at least 8 units of root planing, the Diagnosis and Treatment Planning and the Periodontal Re-Evaluation Examinations. Senior Periodontal Competency Case forms are available in the Comprehensive Care Clinic.

Patient Selection: Patients for the Senior Periodontal Case should present with a diagnosis of chronic periodontitis. There should be at least 2 quadrants in the mouth with pocket depths in the 5-6mm range with accompanying bone and attachment loss in the range of 3-5mm. Any patient chosen for use as a Senior Periodontal Competency must be approved by a full-time Periodontics faculty before the data base examination is initiated, and the Senior Periodontal Competency Case work-up and treatment plan must be approved and graded by a full-time Periodontics faculty before treatment is started. No case will be approved as a Senior Periodontal Competency Case once periodontal treatment has been started.

Senior Periodontal Competency Case Expectations:

1. Case must be approved by Periodontics faculty before work-up is performed.
2. The Senior Periodontal Case Competency is evaluated at three times over the course of treatment resulting in three separate competency examination grades that must be completed in this sequence:
 - o Senior Periodontal Case Diagnosis & Treatment Planning Competency
 - o Senior Periodontal Case Re-Evaluation Competency
 - o Senior Periodontal Case Completion Competency
3. The Senior Periodontal Case Diagnosis & Treatment Planning Competency includes a complete periodontal examination using Senior Periodontal Competency Case forms; formulation of a periodontal problem list and treatment plan. All of which must be completed before any treatment is begun. The completed work-up must be formally presented to and approved by a full-time Periodontics faculty before treatment is begun.
4. Students are expected to perform all periodontal treatment procedures on their Senior Periodontal Competency Case patients. No periodontal treatment step transfers are allowed. In addition, no restorative treatment procedures may be step-transferred before completion of the tissue response and the Periodontal Re-Evaluation Competency examination. Restorative treatment performed prior to completion of the re-evaluation examination should be limited to those procedures which are associated with contributing local etiological factors (overhangs, etc.).
5. Senior Periodontal Competency Case patients should be appointed in the Periodontics Clinic at least once a month during the active phase of periodontal therapy (from the initiation of root planing to the post-surgical evaluation).
6. Full mouth assessment of plaque and inflammation is required documentation for each periodontal appointment and should be used for patient education and motivation purposes. (**NOTE:** For ODC Mastery' a plaque control level of no more than 20% of surfaces with plaque **and** 20% of surfaces with inflammation is required.)

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7. Oral hygiene instruction should be provided at the time of completion of the initial workup or at the first root planing appointment. Re-instruction and motivation for the patient's oral hygiene practices should be given at each appointment. Oral hygiene instructions for the patient should include a combination of toothbrushes and appropriate interproximal oral hygiene aids.
8. Scaling and root planing should be completed by quadrant using both hand and ultrasonic instruments. No more than 2 units of root planing may be completed within a single week.
9. **The following additional procedures should be completed before the patient is re-evaluated**
 - **Extraction of hopeless teeth**
 - **Endodontic treatment**
 - **Restoration of carious lesions encroaching upon the gingival tissues**
10. The Senior Periodontal Case Re-Evaluation Competency should be performed after completion of all non-surgical periodontal therapy and those procedures listed above. Re-evaluation must be completed no sooner than 4 weeks and no later than 3 months following the last root planing. Periodontal Re-Evaluation must include
 - Full mouth charting of periodontal probing depths and attachment levels
 - Bleeding on probing
 - Gingival inflammation
 - Dental plaque
 - Reassessment of patient's periodontal problems
 - Recommendations for further treatment to address any remaining periodontal problems.
 - The Periodontal Re-evaluation must be formally presented to and approved by a fulltime Periodontics faculty. **This is a required competency examination.**

Note: Completion of the Periodontal Re-Evaluation is the absolute minimum requirement for completion of the Senior Periodontal Case Competency. Passing this competency requires completion of the patient's periodontal treatment through this stage, and the student must have accumulated an adequate number of points on the case for a passing grade of ≥ 70

11. Surgical periodontal therapy should be performed in compliance with Periodontics department policy including appropriate post-operative evaluation and treatment.
12. Post-surgical Periodontal Re-evaluation should be performed no sooner than 4 weeks and no later than 2 months following the last surgical procedure. This re-evaluation should include the same procedures described for the pre-surgical re-evaluation including intra-oral photographs.
13. Periodontal maintenance therapy should be provided initially at 2 months following the re-evaluation. Subsequent periodontal recalls may be at 2-4 month intervals as agreed upon in the final treatment plan. All periodontal recalls must be performed in Periodontics Clinic.

Senior Periodontal Competency Case Completion & Outcome Assessment:

Students must provide regular periodontal maintenance therapy for their patient at 2 to 3 month intervals until the last semester of their senior year. ***Consequently, no Senior Periodontal Competency Case will be signed off as completed before February 1st of the senior year.*** Satisfactory completion of the Senior Periodontal Competency Case requires:

1. Performance of the last periodontal maintenance therapy for the patient
2. Formal, written assessment of the status of those periodontal problems identified for their patient at the initial examination, using the initial problem list.

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Senior Periodontal Case Competency Grades:

The Senior Periodontal Case Competency receives three grades, one for the Senior Periodontal Case Diagnosis & Treatment Planning Competency, one for the Senior Periodontal Case Re-Evaluation Competency, and one for the Senior Periodontal Case Completion Competency.

- **The Senior Case work-up grade** is determined using the Diagnosis and Treatment Planning grading rubric. The numeric grade from this examination will be converted to a letter grade (A=90-100; B=80-89; C=70-79, F_≤69) which will count toward 40% of the student's course grade (Fall semester, Senior year). Failure to pass this competency examination by the end of the Fall semester of the senior year will result in an incomplete grade in Comprehensive Care Periodontics.

The Senior Periodontal Case Competency Re-evaluation grade is determined using the Periodontal Re-evaluation Competency grading rubric. The numeric grade from this examination will be averaged with the Senior Periodontal Case completion grade (described below). This numeric average will be converted to a letter grade (A=90-100; B=80-89; C=70-79, D=60-69) which will count toward 40% of the student's grade in Comprehensive Care Periodontics (Spring semester, Senior Year). Failure to pass this competency examination by the end of the Spring semester of the senior year will result in an incomplete grade in Comprehensive Care Periodontics.

The Senior Periodontal Case Completion grade is based upon the number of points awarded for completion of critical steps in the Periodontal treatment plan, the quality of case management, and accuracy of the assessment of treatment outcomes, as indicated on the attached grade form. **Passing this competency requires completion of the patient's periodontal treatment through Re-evaluation, and the student must have accumulated an adequate number of points on the case for a passing grade of ≥ 70 .** The numeric Senior Periodontal Case completion grade will be averaged with the Senior Periodontal Case Competency Re-evaluation grade. This numeric average will be converted to a letter grade (A=90-100; B=80-89; C=70-79, D=60-69) which will count toward 40% of the student's grade in Comprehensive Care Periodontics (Spring semester, Senior Year). Failure to pass this competency examination by the end of the Spring semester of the senior year will result in an incomplete grade in Comprehensive Care Periodontics.

SENIOR PERIODONTAL CASE WORK-UP COMPETENCY

Patient: _____ Student: _____ Date: _____

CLINICAL EXAMINATION:

Oral Disease Control:

Gingival Inflammation

Date: _____ % _____ Inflammation

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
F																	F
P																	P
L																	L
F																	F
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	

Dental Plaque

Date: _____ % _____ plaque

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
F																	F
P																	P
L																	L
F																	F
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	

Calculus:

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
F																	F
P																	P
L																	L
F																	F
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	

Number of + surfaces: _____

Periodontal Findings: (Circle appropriate tooth numbers)

Less than 2mm Attached Gingiva

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
R	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	L

Gingival Recession

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
R	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	L

Dental Hypersensitivity

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
R	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	L

Other Clinical Findings: _____

SENIOR PERIODONTAL CASE WORK-UP COMPETENCY

Patient: _____ Student: _____ Date: _____

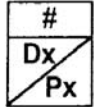
Radiographic Examination. (Circle appropriate tooth numbers.)

Periapical Pathology	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 R 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 L
Root Resorption	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 R 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 L
Widened PDL	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 R 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 L
Overhangs, Carious Lesions	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 R 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 L
Vertical Bone Loss	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 R 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 L
Greater Than 50% Horizontal Bone Loss	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 R 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 L
Furcation Radiolucencies	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 R 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 L

Other Radiographic Findings: _____

OVERALL PERIODONTAL DIAGNOSIS:

INDIVIDUAL TOOTH DIAGNOSIS & PROGNOSIS:



DIAGNOSIS (Dx) = Health (H), Gingivitis (G), Light Periodontitis (LP), Moderate Periodontitis (MP), Severe Periodontitis (SP)
 PROGNOSIS (Px) = Good (G), Fair (F), Poor (P), Hopeless (H)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
/															
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17
/															

OVERALL CASE PROGNOSIS: **G** **F** **P** **H**

AAP Case Type: **I** **II** **III** **IV**

SENIOR PERIODONTAL CASE WORK-UP COMPETENCY

Patient: _____ Student: _____ Date: _____

INITIAL PROBLEM LIST

#	Specific Problem	Proposed Method of Treatment
1	Poor Oral Hygiene PI= %	
2	Gingival Inflammation GI= %	
3	Moderate Pocket Depths #pockets 4-6 mm = ____	
4	Deep Pocket Depths #pockets ≥ 7 mm = ____	
5	Bleeding On Probing # sites =	
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

▶ Each Problem identified should be addressed on the following Treatment Plan. ◀

SENIOR PERIODONTAL CASE WORK-UP COMPETENCY

Patient: _____ Student: _____ Date: _____

PERIODONTAL TREATMENT PLAN

PERIODONTAL DIAGNOSIS:

AAP Case Type:

CAUSE RELATED PHASE:	Proposed Treatment	Problems Addressed
Oral Hygiene Instructions:	Rx: _____	_____
Root Planing:	Rx: _____	_____
Extractions:	Rx: _____	_____
Endodontics:	Rx: _____	_____
Restorative:	Rx: _____	_____
Other:	Rx: _____	_____

RE-EVALUATION: Anticipated Completion Date: _____

SURGICAL PHASE: Surgical Objectives: _____

	Proposed Treatment	Problems Addressed
Area: _____	Procedure: _____	_____
Area: _____	Procedure: _____	_____
Area: _____	Procedure: _____	_____
Area: _____	Procedure: _____	_____

PERIODONTAL MAINTENANCE TREATMENT:

	Proposed Treatment	Treatment Interval
Rx: _____	_____	_____
Rx: _____	_____	_____

SENIOR PERIO CASE DIAGNOSIS & TREATMENT PLANNING COMPETENCY EXAMINATION

Patient: _____ Student: _____ Faculty: _____ Date: _____

PERIODONTAL EXAMINATION:	3 points	√	1 point	√	0 points	√			
Gingival Inflammation UL UR LR LL	0-3 surfaces		4-6 surfaces		7+ surfaces				
Dental Plaque UL UR LR LL	0-3 surfaces		4-6 surfaces		7+ surfaces				
Calculus	0-1 surfaces		2-4 surfaces		5+ surfaces				
M-BP measurements UL UR LR LL	0-2 errors		3-4 errors		5+ errors				
M-CEJ measurements UL UR LR LL	0-2 errors		3-4 errors		5+ errors				
PAL measurements UL UR LR LL	0-2 errors		3-4 errors		5+ errors				
Furcation involvement	0 errors		1-2 errors		3+ errors				
Tooth Mobility	0-1 errors		2-3 errors		4+ errors				
	Bleeding on Probing		Yes		No				
	Chart identification/date		Yes		No				
	Chart complete & legible		Yes		No				
Periodontal Findings	3 points	√	1 point	√	0 points	√			
<2mm Attached Gingiva	0-2 errors		3-4 errors		5+ errors				
Gingival Recession	0-2 errors		3-4 errors		5+ errors				
Dental Hypersensitivity	0-3 errors		4-6 errors		7+ errors				
Radiographic Examination:	3 points	√	1 point	√	0 points	√			
Periapical Pathology	0-1 errors		2-3 errors		4+ errors				
Root Resorption	0-1 errors		2-3 errors		4+ errors				
Widened PDL	0-1 errors		2-3 errors		4+ errors				
Overhangs, Caries	0-1 errors		2-3 errors		4+ errors				
Vertical Bone Loss	0-1 errors		2-3 errors		4+ errors				
>50% Bone Loss	0-1 errors		2-3 errors		4+ errors				
Furcal Radiolucencies	0-1 errors		2-3 errors		4+ errors				
DIAGNOSIS & PROGNOSIS:	3 points	√	2 points	√	0 points	√			
Overall Case Diagnosis:			Yes		No				
• Including Extent & Severity			Yes		No				
Individual Tooth Diagnosis	0-3 errors		4-6 errors		7+ errors				
Individual Tooth Prognosis	0-3 errors		4-6 errors		7+ errors				
Periodontal Problem List	3 points	√	2 points	√	0 points	√			
Statement of problems	All problems identified. Problems stated with enough detail.		Missed 1 problem. Problems not stated with enough detail.		Missed ≥2 problems. Problems not stated with enough detail.				
Method of treatment	Proper treatment method identified for each problem		Treatment methods not specific for 1-2 problems		Treatment methods missing and not specific for >2 problems.				
PERIODONTAL TREATMENT PLAN	3 points	√	2 points	√	0 points	√			
Oral Hygiene Instructions:	OHI include proper devices & technics		OHI do not include proper devices/ technics		No OHI included				
Root Planing:	Root planing properly included on treatment plan. Proper number of units included		Root planing properly included on treatment plan. Number of units incorrect.		Root planing improperly placed or omitted from treatment plan.				
Extractions/ Restorative:	Extractions/Restorations on plan and properly sequenced.		Extractions/Restorations on plan but not properly sequenced.		Extractions/Restorations omitted from treatment plan.				
Re-Evaluation:	Re-Evaluation at correct time interval.		Re-Evaluation not at correct time interval.		Re-Evaluation omitted from treatment plan.				
Surgical Phase:	3 points	√	2 points	√	0 points	√			
Surgical Objectives	Surgical objectives stated & appropriate		Surgical objectives are inappropriate		No surgical objectives stated.				
Area:	Areas requiring surgery properly identified		Missed 1 area requiring surgery.		Missed ≥2 areas requiring surgery.				
Procedure	Procedure stated for all areas is appropriate and consistent with objective		Procedure stated for 1 area is not appropriate for surgical objective		Procedures not listed or inappropriate for ≥2 areas.				
Periodontal Maintenance Treatment	3 points	√	2 points	√	0 points	√			
Rx treatment	Prescribed Mtx treatment is appropriate		Mtx plan omitted one minor procedure		Mtx plan ignored completely.				
Treatment Interval	Treatment interval appropriate for case		Treatment interval not appropriate for case		SPT treatment interval ignored completely.				
Competency Grade Calculation:	3 points X ____ =		+	2 points X ____ =		+	1 point X ____ =		=